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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\* *MS* *AV*

This application is a CON of 10/076,804 02/16/2002 PAT 6,679,594

\*\* FOREIGN APPLICATIONS \*\*\*\* *Wade* *AV*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/14/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY ID	DRAWING 8	CLAIMS 20	CLAIMS 5
Verified and Acknowledged	Examiner's Signature <i>Wade</i> Initials <i>AV</i>				

## ADDRESS

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## TITLE

Imaging media cartridge having a reserve chamber

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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